

**UNITES STATES  
DEPARTMENT OF THE INTERIOR  
Bureau of Reclamation  
Klamath Basin Area Office**

**TULE LAKE (Renewal)**

**STATEMENT OF OPERATION and CONTRACT EXTENSION REQUEST**

Lease Area \_\_\_\_\_ Lot No. \_\_\_\_\_ (one form per lot).

I, \_\_\_\_\_ intend to extend my contract for \_\_\_\_\_ pursuant to the terms  
(Print Name) (Year)  
and conditions of the Lease Contact, as amended. In order to complete lease contract requirements, sections A, B, and C must be filled out. All Sub-Leasing/Transfer Request forms are available from the Bureau of Reclamation website at [www.usbr.gov/mp/kbao](http://www.usbr.gov/mp/kbao).

**A. LEASE OPERATIONS (This Year)**

**Crop** (If more than one crop will be grown, sketch (below) to indicate crop locations.

Type \_\_\_\_\_ Type \_\_\_\_\_ Type \_\_\_\_\_

Acreage \_\_\_\_\_ Acreage \_\_\_\_\_ Acreage \_\_\_\_\_

N

W

E

S

(over)

**B. LEASE OPERATIONS (Last year):** (Fill in table below for each crop type grown.)

Crop:	Crop:	Crop:
Cultivar (variety) Used:	Cultivar (variety) Used:	Cultivar (variety) Used:
Seed/Seed Piece Treatment:	Seed/Seed Piece Treatment:	Seed/Seed Piece Treatment:
Planting Date:	Planting Date:	Planting Date:
Harvest Date:	Harvest Date:	Harvest Date:
Crop Yield (tons/acre):	Crop Yield (tons/acre):	Crop Yield (tons/acre):
Fertilizer Formulation:	Fertilizer Formulation:	Fertilizer Formulation:
Rate (Units/acre):	Rate (Units/acre):	Rate (Units/acre):
Number of Applications:	Number of Applications:	Number of Applications:

**C. COVER CROP OPERATIONS (Last year, if applicable)**

Crop Type	
Planting Date	
Method used (broadcast, drill, etc.)	

\_\_\_\_\_  
Lessee(s) Signature

\_\_\_\_\_  
Date